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RURAL DISTRICT OF CHAILEY

Annual Report

of the

Medical Officer of Health

for the

Year Ended 31st December, 1954

Public Health Department,
Lewes House,
LEWES, Sussex.

September, 1955.

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INDEX

	<i>Page</i>
Ambulance Facilities	13
Birth, Death and Population Table, including Summary.. ..	10
Births, including Stillbirths, and Birth Rate	10, 11
Clinics and Treatment Centres	14
Deaths	10, 11, 12
Factories Act, 1937	24
Food Inspection	22
General Provision of Health Services in the Area.. ..	13, 14
Hospitals	14
Housing	19
Infectious Diseases—Prevalence and Control Over	25
Laboratory Facilities	13
Milk and Dairies Order	22
Nursing in the Home	13
Public Cleansing	18
Rodent Control	24
Sanitary Inspection of the District	23
Sewage Disposal	8, 17
Statistics for the Area	10
Tuberculosis	27
Water Supply	15, 16

CHAILEY RURAL DISTRICT COUNCIL

PUBLIC HEALTH DEPARTMENT,
LEWES HOUSE,
LEWES.

September, 1955.

To the Chairman and Members of the Chailey Rural District Council.

MR. CHAIRMAN, MY LORD, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the health of the inhabitants and on the sanitary conditions of the Chailey Rural District for the year 1954.

Before giving the usual comments upon the statistics and the state of public health of the Chailey Rural District a few preliminary remarks on various matters which the smaller local authorities have had to deal with recently may not be amiss.

It may not be known generally that two-thirds of all local authorities in England and Wales are those which may be termed the smaller local authorities, that is the smaller boroughs, urban districts and rural districts. A large proportion are rural districts. The total acreage of the smaller authorities far exceeds that of the larger authorities such as County Boroughs and larger Municipal Boroughs, with the exception, of course, of the total acreage of County Council areas. The greatest total acreage is that of the Rural Districts amongst the smaller local authorities. Most of the Rural Districts present what may be called the physical difficulty of distance, and many officials of Rural District Councils have to traverse far greater distances in the course of their work than their more fortunate (or perhaps unfortunate) brethren in County Boroughs and in larger Municipal Boroughs.

I need not mention the multifarious duties carried out by your Public Health Staff since these are well known through monthly and annual health reports and special reports.

Recently housing has taken on a slightly new aspect under the provisions of the Housing Repairs and Rents Act, 1954, and a good deal of work has already been done to meet the changes due to the Act, such as estimating, provisionally, the number of houses unfit for human habitation, employing a far clearer standard than the vague one laid down before. A good deal of work has been initiated in relation to improvement grants during the year and eighteen houses were deemed fit for grants in 1954. As to the provision of more new Council houses, it would appear that the continuing rises in building costs and the burden of housing subsidies may become a financial millstone round many of the smaller local authorities' necks. Already some authorities have declined to build more Council houses, as they think private enterprise can provide sufficient new houses at competitive prices. There have been some doubts as to the competition between builders and the quality of the houses provided, however, in the past, and perhaps these doubts will arise in the future if not now.

At various times during the year the private slaughter houses in your district were inspected by members of your Health Committee and by public health officials with a view of noting the various defects and bringing them to the notice of the owners if they wished to recommence slaughtering. This

followed the decontrol of meat in July, 1954. One private slaughter house in Ringmer has been made quite a good job of to bring it up to public health requirements and work is now being completed at a private slaughter house at Barcombe. With the improvement of the Ringmer slaughter house and the anticipation of improvements at others, there arose the local authority's duty to provide an adequate service of meat inspection and this has been done. This has meant extra work and extra hours for the sanitary inspectors, but has ensured that meat and offal from the slaughter house were fit for human consumption.

In addition to his ordinary duties the sanitary inspector of smaller local authorities has other matters to attend to such as the supervision of refuse collection and disposal, the supervision of cesspool emptying and of sewage disposal systems. Some sanitary inspectors are also housing officers.

In one borough of 8,000 population recently surveyed by a Working Party enquiring into the training and recruitment of sanitary inspectors, the borough sanitary inspector was found to be also Engineer and Surveyor, Chief Financial Officer, Chief Rating Officer, Assistant Town Clerk and Car Park Superintendent.

After these preliminary remarks the following short observations on the main features relating to the state of public health and the sanitary circumstances of your area during 1954 may be of interest.

The estimated population of the Chailey Rural District for 1954 was 19,110. In 1945 the population was 17,320, and reached the highest recorded figure, 20,510, in 1951. A boundary adjustment between the Rural District and Brighton County Borough reduced the population of the former. It would appear that the population of your district is again on the increase, still it is too early to be sure of this. If there is an increase in future years it will be mainly achieved by the numbers of new residents coming to reside in the district rather than by an excess of births over deaths, as there is a trend towards progressively lower birth rates and the proportion of middle-aged and elderly people in the district is considerably above that of the younger generations.

The comparable birth rate for the year was 14.26 per 1,000 population as against 15.2 for England and Wales.

The deaths of non-residents of the district in institutions in the Rural area weights the crude death rate. By subtracting the number of those deaths from the total number of deaths which occurred during the year, the number of deaths of the residents, who were really actual Chailey Rural District people, was arrived at. This latter number gave a comparable death rate of 9.85 per 1,000 population as compared with 11.30 for England and Wales for 1954.

The deaths of mothers in, or in consequence of, childbirth, was nil for the year under review. Only one maternal death has occurred in your district during the last six years and the maternal mortality rate per 1,000 live and still births for that period was 0.63 as compared with 0.80 for England and Wales for the same six years.

Six infants died during the year, and this gave an infantile mortality rate of 25.75 per 1,000 live births. This figure is slightly more than the rate of 25.5 for England and Wales for 1954. In 1949 the rate for your district was nearly twice as high as the rate for the present year. The causes of the six infantile deaths in 1954 were not preventable, and soon put an end to the lives of the unfortunate victims.

The chief causes of death in the general population during the year followed

the usual pattern with heart disease (121 deaths); cancer (54 deaths) and vascular lesions of the nervous system (50 deaths) at the top of the table. Sixteen deaths were due to pneumonia. The bulk of the latter deaths were in elderly people and due in the most part to the defences being weakened in old age against infection and the inclement weather during part of the year. There were only two deaths due to pulmonary tuberculosis. In 1929 there were no less than 23 deaths due to this cause, whilst in 1949 there were eleven. The sharp decline in deaths from pulmonary tuberculosis in recent years has been due to advances in medical and surgical treatment of cases of the disease. As remarked in previous Annual Reports, the disease seems to be on the way out. It may take some time yet before it becomes a rare disease, or, one hopes optimistically, stamped out for ever, but the abrupt slide downwards in the last few years in the mortality has been dramatic and most pleasing to all concerned.

The highest age at death of Chailey residents in 1954 was 100 years and the lowest 35 minutes, which gave an average age at death of 70 years.

Generally, throughout the country deaths from tuberculosis have decreased in number to about two thirds since 1938, whilst deaths from diphtheria are now less than one hundredth of the 1938 total. Deaths from cancer of the respiratory system have increased one and one half times in men and more than two thirds in women since 1938. Deaths from cancer of other organs have also increased. However, deaths from cancer of several sites have declined since 1938—of the mouth and pharynx by more than half for men, and nearly a quarter for women; of the digestive organs by about one eighth; of the womb more than one quarter. Cancer of the breast in women has had a slight decline. Cancer deaths in your district have followed more or less the same pattern, but it appears significant that out of 54 cancer deaths in the district, nine were due to cancer of the lung or bronchus and all were in males. However, recent research has indicated that excessive cigarette smoking may not be so much to blame for the latter types of deaths as was held formerly.

Early diagnosis is still probably the best means of reducing the increasing number of deaths from cancer. Some people suspect they have the disease but hug the secret to their breasts and consult a doctor too late. The up-to-date equipments for diagnosis and treatment are all available, and the earlier cases are diagnosed and treated the better.

The chief causes of mortality in bygone years, such as cholera, typhoid, smallpox, diphtheria and enteritis have been brought under control and most have been almost vanquished for ever.

Owing to a higher standard of living people are now more able to resist infection, and advances in medical science have been most successful in combating causes of early death. Improved hygiene such as pure water supplies and efficient sewage disposal systems has greatly reduced such murrains as infantile diarrhoea, typhoid and other dangerous intestinal diseases to comparatively small proportions, so that the once heavy toll of deaths has been arrested to such a point that deaths from these causes are now rare indeed.

The hazards of old age, in the shape of heart failure, cerebral haemorrhage and cancer, are still with us however, and the progress in their prevention has been much less rapid than that attained in other maladies.

Generally, the problem is two-fold, and may be solved firstly by the provision of adequate care for the elderly, and secondly by more research being undertaken to prevent or limit the hazards of old age. The latter is

more difficult than the former, and only now has research been really initiated.

As regards deaths from heart disease, the majority occur in elderly people. People who are ageing should bear in mind that the heart is ageing also and is compelled to do harder work, mostly on account of the hardening of the arteries, so that the latter become narrower and more rigid and arterio-sclerosis is present. The sensible way to look at this is that it is inevitable in old age and means that the amount of physical work should be reduced by elderly people. Many an old person remains quite free from any heart disturbance as long as he keeps quiet, but feels the weakness of the heart in the form of palpitations and breathlessness as soon as he tries to do more than the heart can cope with. Keeping quiet does not mean complete immobility, or sitting in an armchair nearly all the time, but it means going a little slower and taking it easier. As to those who take the liberty when they are elderly of trying to behave like a young man, the advice is "Be your age." So far medicine cannot reverse the process of growing old, though it can give a little help occasionally to the labouring heart.

A predisposing factor in deaths from cerebral haemorrhage, which forms the largest bulk of deaths from vascular lesions of the nervous system and occurs mostly in the elderly, is arterio-sclerosis. Here again the advice as given above is the same. It is advisable that the family doctor should keep an eye on those who have reached the age of arterio-sclerosis, and that periodical medical examinations be made.

As health is the adjustment of a person's physical and mental state to adapt himself harmoniously within himself and in relation to his outside environment, this should be borne in mind by the elderly and the middle aged. Most children and adolescents are healthy in any case without thinking about it. The majority of young adults should hardly think at all about their state of health. Most are healthy, and to cultivate the medicine-swallowing habit is a waste of the State's money, a waste of time to the busy doctor and worst of all tends to make the habitual medicine swallower neurotic.

During the year there was a small total of 74 cases of infectious disease notified in the Chailey Rural District. Forty-six of the cases were of whooping cough. Only six cases of measles were notified, in striking contrast to 370 cases of this disease notified in 1953.

A very small number of scarlet fever cases were notified amounting to four cases, as compared with eleven cases in the previous year. This disease in former years left crippled hearts, cases of serious ear trouble, rheumatism and other complications in its train, and had a considerable mortality. Now the disease is mild. Complications hardly ever occur due to the present treatment. Deaths from this infection are practically nil nowadays. Whether the infecting organism has lost its former virulence, or more of the young population have become immune, or partially immune, through repeated small doses of the organism has not yet been clearly proved. Both are reasonable assumptions.

One case of paratyphoid fever was notified during the year and made a good recovery. The original source of the infection was not found, despite a careful and prolonged investigation. It is very difficult in some cases to pin down a source of infection if a case has moved about from place to place, and essential information such as food, etc., ingested, is not given either because the patient, or the patient's parents, forget or cannot remember everything

which might help to track down the source of infection. One vital link may be never mentioned, despite prolonged questioning by the enquirer.

The other cases of infectious diseases notified during the year were nine cases of pneumonia, three of erysipelas, three of puerperal pyrexia and two of food poisoning.

As there is now virtual control over most of the infectious diseases by means of the use of anti-biotics, sulpha drugs and vaccines, they have ceased to be of such heavy and grave concern as they were formerly.

Diphtheria has been vanquished. The last case of this disease in your district was notified in 1949. Immunisation has proved the effective weapon in wiping out this foul infection which claimed many victims in former years.

There remains the still vexed problem of poliomyelitis. As predicted in my Annual Report of 1952, a vaccine has been discovered, but a vaccine used in America recently had unfortunate results. The present position is that the researchers have had to begin all over again, whilst retaining certain principles observed in the manufacture of the original vaccine. It may take some time before an absolutely safe and sure vaccine is produced. If it is, it may be part of the answer or perhaps the whole answer. Certain aspects of the infection are not yet clearly understood, and indeed, many factors have yet to be unearthed concerning the infection and its impact upon those who develop paralysis, not to mention those who escape paralysis and those who become infected and have only trifling symptoms, not much more than those resembling a slight cold. There is also the question of carriers of the disease who unwittingly infect others, although appearing perfectly healthy themselves. A great deal of work has to be done yet.

During the year 24 cases of pulmonary tuberculosis were notified, of these six were of persons who came to live in the rural district from elsewhere. Three cases of non-pulmonary tuberculosis were notified, one case came to reside in the district from another part of the country.

Mention has been made already in this preface of the rapid decline in tuberculosis mortality. About forty years ago non-pulmonary tuberculosis in the shape of enlarged neck glands, infected joints and in other parts of the body other than the lungs was quite common. The small number of cases which occur nowadays in your rural district is due to many factors—the pasteurisation of milk, the weeding out of infected cows and more T.T. herds having been established.

As to the sanitary circumstances of the area the main features during the year were as follows:

Water from the main water supplies was of excellent quality and at all times fit for human consumption. Very few of us pause to think what an important thing a pure and ample water supply is. It is one of the fundamentals of healthy living, and we could not exist very long without it.

A private water supply was found to be polluted and immediate steps were taken to chlorinate the supply. The source of pollution was traced and eliminated. Samples from this supply after chlorination and after the removal of the source of pollution, examined bacteriologically and chemically showed that the supply was perfectly safe for drinking purposes.

Negotiations took place during the year towards the laying of water mains through the rural district as far as the Burgess Hill area. When the mains are laid ultimately, this will effect supplies from the main in many cases and eliminate a number of wells and private supplies.

During the year 681 linear yards of extensions to water mains were laid.

Your Council is a very progressive one, and have always endeavoured to supply two of the basic essentials of public health, namely, a pure and wholesome water supply and up-to-date sewage disposal systems, wherever and whenever these could be accomplished. There have been many difficulties, especially as regards the establishment of sewage works, but the blame for any delays cannot be laid upon the Council.

At Wivelsfield new sewage disposal works and the laying of sewers were completed.

A sewage disposal scheme was almost completed at Beddingham.

Various delays have been experienced (and borne patiently) relating to sewage disposal schemes in other parishes. At Plumpton there has been practically no progress. Kingston Village is crying out for a proper sewage disposal system on account of the constantly recurring nuisances of fouled ditches, objectionable smells and the very real danger to public health through the present antiquated broken-down system. Formal consent has been obtained from the Minister concerning the latter scheme, but consent as to the date to commence the work is still forthcoming.

Small sewage disposal plants were completed at South Heighton.

The prize for delay in establishing a proper sewage disposal system is in connection with the unfortunate village of Rodmell. A Public Enquiry was held in Rodmell about four years ago. So far the scheme has not received Ministerial approval. The present conditions in the village are truly horrible. In contemplating the disposal of human excreta one has in mind the following viewpoints—the hygienic, the aesthetic and the economic.

Dealing with Rodmell, here we have a village where the pail closet system still exists, with all its dangers and nauseousness. The worst feature, however, is that of raw sewage draining to an open ditch—an offence against the Public Health Act, 1936, and an offence to the nostrils as well. Worse still, there is always a considerable danger to public health. I have observed children playing in or near the sewage-laden ditch. It is important to emphasise that the village is mainly a milk-producing one. The hazard of infecting the milk with dangerous pathogenic organisms cannot be conveniently forgotten. I am not sure to whom the prize for the delay in establishing a proper sewage disposal system in Rodmell should be awarded. Anyhow, if ever there is a village crying out for an up-to-date sewage disposal system Rodmell is one. Even the sewage itself in the ditch cries to high heaven.

Literally hundreds of new houses are being constructed or are in the course of construction in Peacehaven and Telscombe Cliffs and there are likely to be hundreds more in the future. Cesspools form the only system of sewage disposal in the vast majority of cases. Constant complaints are received about leaking and overflowing cesspools. The cesspools have, over the years, very effectively made the ground surrounding them sodden with sewage and there are thousands of them. The increased number of new houses will only aggravate the soil pollution as nearly all cesspools leak sooner or later. It is really high time that the two parishes had the amenities of town dwellers as they combine to make what is almost an urbanised area. One of the amenities is the proper disposal of sewage.

In order to prevent the recurrence of the brown-tailed moth infestation which spread over Peacehaven and Telscombe Cliffs in the previous year, treatment of bushes, etc., likely to harbour the pest was carried out in the early

part of the year. The moth's natural enemies may, however, get the upper hand, and reduce the pest to negligible proportions in the future. Amongst the enemies are certain types of flies and bacteria. The numbers of the moths are also controlled by such things as temperature and humidity.

My thanks are due to the Health Committee for their kindness and encouragement during the year and to other officials for their help and courtesy.

I am indebted to my own staff, without whose help this Report could not have been written.

My Lord, Ladies and Gentleman, I remain,

Yours obediently,

G. M. DAVIDSON LOBBAN,

M.B., CH.B., D.P.H., F.R.S.I., etc.

Medical Officer of Health.

SECTION I

STATISTICS FOR THE AREA, 1954

Area (in acres)	64,216
Population (estimated)	19,110
Rateable Value as at 1st April, 1954	£162,635
Product of a Penny Rate, 1954-55	£665/18/10

EXTRACTS FROM VITAL STATISTICS

				Male	Female	Total	Rate per 1,000 Population
<i>Live Births</i>							
Legitimate	..	..	..	116	106	222	
Illegitimate	..	..	..	5	6	11	
						233	12.19
<i>Deaths</i>	..	..	..	153	159	312	16.33
							Rate per 1,000 Live and Still Births
Maternal Mortality	..	..	..	—	0	0	0.00
							Rate per 1,000 Live Births
Infantile Mortality	..	..	..	4	2	6	25.75

POPULATION

The Registrar-General's estimate of the Chailey Rural District population for the year 1954 was 19,110. The following table shows the annual population of the rural district for the past ten years, together with the numbers of births and deaths and the birth rates and death rates each year during the same period:—

Year	Population	Births	Deaths	Birth Rate	Death Rate
1945	17,320	266	294	15.35	16.97
1946	18,410	308	240	16.73	13.03
1947	18,860	330	246	17.49	13.04
1948	20,080	315	252	15.68	12.54
1949	20,480	297	248	14.50	12.11
1950	20,340	285	243	14.01	11.95
1951	20,510	270	276	13.16	13.46
1952	19,540	238	244	12.18	12.48
1953	18,840	233	356	12.37	18.89
1954	19,110	233	312	12.19	16.33

The estimated population figure for mid-1954 (19,110) shows an increase of 270 on the previous year's total of 18,840. For the preceding two years the population of the district has been reduced owing to adjustments in the boundary and this year's increase shows that almost certainly the true position is that the population density per acre in the district is gradually, but steadily, increasing.

Three hundred and twelve deaths were recorded in the Rural District during 1954, this being 44 less than the total of 356 recorded in 1953. The 1953 total was the highest recorded for many years, owing to the decision of the Registrar-General that deaths of persons in certain types of institutions

should be registered as being deaths of residents in that area, although in fact the persons concerned had not resided in the district prior to entering the institution. The 1954 total is still affected by the Registrar-General's decision, and although less than the 1953 total, is higher than any other total for many years past, owing to the number of deaths of persons normally resident outside the Chailey Rural District area which have taken place at Pouchlands Hospital and are included in the annual total. The only method of arriving at the annual number of deaths of Chailey residents is to subtract the number of deaths of non-residents who have died in institutions in the district during the year from the gross total of deaths in the area during the same period. In 1954 the gross total was 312 and the number of deaths of non-residents in Pouchlands was 47. This leaves 265 representing a crude death rate of Chailey residents of 13.87 per 1,000 population and a comparable death rate of 9.85 per 1,000 population. Both of the latter rates are lower than the equivalent rates in the preceding year.

BIRTH RATE

The crude birth rate for the year under review was 12.19 per 1,000 population, which is a little lower than the figure of 12.37 for 1953. While it is disappointing that the increased rate of 1953 has not been fully maintained, it is nevertheless satisfactory that the figure is higher than that for 1952.

An area comparability factor of 1.17 is applicable to the crude birth rate. This factor is a compensating one for the purpose of securing a fair comparison with the birth rates of other areas. On applying the factor the comparable birth rate for the Chailey Rural District is 14.26 per 1,000 population. The birth rate for England and Wales for 1954 was 15.2.

DEATH RATE

The crude death rate for 1954 for the district was 16.33 per 1,000 population. As explained in a preceding paragraph, direct comparison with the rates for earlier years cannot be made as the basis of calculation was altered in 1953 by the Registrar-General. Applying an area comparability factor of 0.71 for 1954 for the same reason as an area comparability factor was applied to the crude birth rate, a comparable death rate of 11.59 is arrived at. The death rate for England and Wales for 1954 was 11.3.

CAUSES OF DEATH

During the year there was a total of 312 deaths, being 153 males and 159 females. The following table shows the causes of death:—

	<i>Male Female Total</i>		
Heart Disease	53	68	121
Cancer	26	28	54
Vascular Lesions of the Nervous System	26	24	50
Pneumonia	7	9	16
Diseases of the Circulatory System other than Heart Disease	4	5	9
Bronchitis	6	2	8
Accidents other than Motor Vehicle Accidents	4	1	5
Motor Vehicle Accidents	2	2	4
Hyperplasia of Prostrate	4	—	4
Leukaemia, Aleukaemia	—	3	3
Diabetes	1	2	3
Diseases of the Respiratory System other than mentioned elsewhere	2	1	3

Ulcer of Stomach and Duodenum	3	—	3
Tuberculosis, Respiratory	—	2	2
Congenital Malformations	2	—	2
Syphilitic Disease	1	—	1
Other Infective and Parasitic Diseases	1	—	1
Influenza	1	—	1
Gastritis, Enteritis and Diarrhoea	—	1	1
Suicide	1	—	1
Other Defined and Ill-defined Diseases	9	11	20
	153	159	312

As is usually the case in the Chailey Rural District, the chief cause of death in 1954 was heart disease, with 121 deaths. The disease causing the next greatest number of deaths was cancer with 54 deaths, followed by vascular lesions of the nervous system with 50 deaths.

The highest age at death was 100 years
The lowest age at death was 35 minutes
The average age at death was 70 years

SPECIFIC CAUSES OF DEATH

Heart Disease and Diseases of the Circulatory System

Well over one-third of the total number of deaths in the area during 1954 were due to heart disease. Most of these deaths took place among elderly people, and were due, briefly, to the heart wearing out after giving a lifetime of constant service. The large proportion of deaths due to heart disease is, paradoxically, a compliment to the medical profession in so far as the doctor's skill now wards off death in so many forms that the human body is given a fair chance to wear out naturally, rather than to be destroyed by violence or disease.

Cancer

The fifty-four deaths from cancer which took place in Chailey Rural District during 1954 gave a death rate of 2.82 per 1,000 population. Twenty-six of the deaths were of males and 28 of females. Nine deaths from cancer of the lung or bronchus occurred in males, while no death from cancer of these sites occurred among females. This follows the general pattern throughout the country, as very nearly six times as many men as women died from cancer of the lung or bronchus throughout England and Wales during 1954. One is tempted to wonder whether the nation's tobacco smoking habits are the root cause of the vast difference between the death rates for males and females due to cancer at these sites. Many are tempted to argue that as many women as men smoke, but it must be remembered firstly that more men than women are heavy smokers, and secondly that it is probable that any effect that tobacco smoking may have so far as increasing a person's susceptibility to cancer is concerned, is likely to be cumulative over a fairly large number of years, and it is only in recent years that women in this country have become tobacco smokers to any great extent.

Vascular Lesions of the Nervous System

Vascular lesions of the nervous system include cerebral haemorrhage, cerebral embolism and thrombosis and other lesions. A total of fifty deaths in Chailey Rural District were classified under this heading during 1954, 26 being males and 24 females. Most of these deaths occur amongst elderly persons, and a good proportion of them take place in an institution in the area to which elderly and infirm people are sent from surrounding areas, as well as from the Rural District.

SECTION II

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA

Public Health Facilities of the Local Authority

During the period under review the Medical Officer of Health for the Rural District of Chailey also acted as Medical Officer of Health for the Borough of Lewes and the Urban Districts of Newhaven and Seaford.

One Chief Sanitary Inspector and two Sanitary Inspectors carry out duties in the Rural District.

Laboratory Facilities

The Public Health Laboratory, established at the Royal Sussex County Hospital, Brighton, has proved of great assistance during the year.

The Laboratory has carried out for the Rural District, free of charge, the examination of sputum, laryngeal, nose and throat swabs and faeces and has also undertaken the examination of milk, water, ice cream and quarter samples from cows. Altogether the Laboratory carried out 255 different examinations for the rural district during the year under review. This service is extremely valuable, both to your Medical Officer of Health and to the medical practitioners practising in the district. It is particularly useful in providing a certain means of discovering whether or not a person has been invaded by the infective organisms causing tuberculosis or other infections and is also of great use in detecting any impurities or infective organisms in milk, ice-cream or foodstuffs generally.

Ambulance Facilities

The provision of the ambulance service is the responsibility of the East Sussex County Council, which arranges for the two ambulances and one sitting case car stationed at Lewes to be available for the transfer of cases into hospital from this area, with the exception of cases from Wivelsfield, when the service stationed at Haywards Heath is used, from Ditchling, when the service stationed at Hurstpierpoint is implemented, and from South Highton, Peacehaven, Tarring Neville, Piddinghoe and Telscombe, when the service stationed at Newhaven is used.

With the exception of the area served by the ambulance stationed at Newhaven, both infectious and non-infectious cases are conveyed in the same ambulances and arrangements are in being for the disinfection of ambulances, bedding, clothing, etc., after use for the transport of an infectious case. The Newhaven ambulance, however, is not available for the transport of infectious disease cases, but under the provisions of the Ambulance Scheme, ambulances from adjacent ambulance stations can be called upon, if required, for the conveyance of infectious disease cases. Generally, arrangements are made for any further calls received when all the ambulances of a particular station are out on duty to be dealt with by another station in the County Council's area.

The East Sussex County Council provides facilities for the transport of tuberculous patients.

Nursing in the Home

As in previous years, the East Sussex County Council, as empowered by

Section 25 of the National Health Service Act, 1946, has arranged for this service to be provided by the East Sussex County Nursing Association through the District Nursing Associations.

Hospitals

The South East Metropolitan Regional Hospital Board is responsible for the provision of hospital accommodation. The accommodation available in the area remains materially the same as it was prior to the passing of the Act.

Clinics and Treatment Centres

The following is a list of clinics and treatment centres available during 1954 for residents of the district:—

<i>Description and Situation</i>	<i>Day and Time of Attendance</i>	<i>By Whom Provided</i>
Chest Clinic, Victoria Hospital, Lewes	Monday and Friday, at 2.0 p.m. By appointment	Regional Hospital Board
Orthopaedic Clinic, Y.M.C.A., Lewes	Monday, Wednesday and Friday, 10 a.m. to 1 p.m. By Appointment	Mid-Sussex Hospital Board
Artificial Pneumothorax, Victoria Hospital, Lewes	Wednesday Women — 2.15 p.m. Men — 3.30 p.m.	Regional Hospital Board
Nervous Disorders Clinic, Victoria Hospital, Lewes	Every Tuesday afternoon from 2.0 o'clock onwards	Regional Hospital Board

In addition to the above there are Infant Welfare Centres and Dental and Minor Ailment Clinics available for residents in the area.

Provisions for the Care of Mental Defectives

The East Sussex County Council deals with the Lunacy and Mental Deficiency Services in respect of patients outside Institutions. All institutional care is the responsibility of the Regional Hospital Board.

SECTION III

SANITARY CIRCUMSTANCES AND SANITARY INSPECTION OF THE AREA

1. WATER SUPPLY

The Statutory Water Authorities supplying the several areas within the rural district continued as before, viz.:—

Chailey Rural District Council
Brighton County Borough Council
Lewes Borough Council
Newhaven and Seaford Water Company
Burgess Hill Water Company
Mid-Sussex Joint Water Board

Samples of water were taken by each of these Undertakings throughout the year and copies of the results have been received by the Council. These showed the quality of the water supplies throughout the area have been maintained in a satisfactory state.

Copy of the analyst's report on a random sample of water taken in the Chailey Rural District and supplied from the Offham Pumping Station is given below:

Taken on the 7th September, 1954, and showed the following characteristics:

Colour	..	..	None
Smell..	..	..	None
Sediment	..	..	A trace of fine organic debris

CHEMICAL ANALYSIS

	..	..	..	..	..	<i>Parts per million</i>
Total solids (dried at 100°C.)	..	..	..	..	..	280
Solids (after ignition)	..	..	..	..	..	230
Chlorine	..	..	..	..	..	23
Ammonia (free)	..	..	..	..	..	0.01
Ammonia (albuminoid)	..	..	..	..	..	0.05
Oxygen taken from permanganate in $\frac{1}{4}$ hour	..	..	..	..	..	Nil
Oxygen taken from permanganate in 4 hours	..	..	..	..	..	Nil
Nitrogen as Nitrates and Nitrites	..	..	..	..	..	3.20
Nitrites	..	..	..	..	..	Nil
Hardness (total)	..	..	..	..	..	230
Hardness (after boiling)	..	..	..	..	..	70
Phosphates	..	..	..	..	..	Nil
Metallic impurity	..	..	..	..	Iron	0.15
PH	..	..	7.5	..	..	
Chlorine—just detected	..	..	..	..	..	

BACTERIOLOGICAL EXAMINATION

The organisms per ml. which grew on Nutrient Agar in three days at 22°C. under aerobic conditions and were then visible to the naked eye as colonies numbered	15
On Agar at blood temperature and under aerobic conditions colonies were noticed after two days' incubation	0
Probable number of Coli-Aerogenes organisms in 100 ml. of the original water	0

REPORT

Both chemically and bacteriologically the above results are satisfactory, and I am of opinion, therefore, that this water is perfectly safe for drinking purposes, and suitable for a Public Supply.

R. F. WRIGHT,
Public Analyst.

13th September, 1954.

During the year extensions of water mains were limited to the following:		
Allington Road, Newick, for private development	199	lin. yds.
Anchor Field, Ringmer, Council Housing development ..	267	„
South Chailey, Council Housing development	215	„
	681	„

Forty-two water samples were taken from sixteen private supplies and nine from public supplies during the year, with the following results:

Public Supplies:

Satisfactory	9
Unsatisfactory	Nil

Private Supplies:

Satisfactory	26
Unsatisfactory	16

As a result of Notices served, two properties were connected to public supply.

A private supply serving Firle Village was found to be polluted, whereupon an improvised system of chlorination was immediately put into operation and steps taken to trace pollution. After investigation the source of pollution was established and eventually eliminated. The samples regularly taken since continue to show satisfactory results.

Samples taken from the Canteen, Asham Cement Works, were found to have become polluted, and after consultation with the Management, samples were taken from a new bore laid down by that Company. Continued samples show that the water from the new bore was of suitable quality, and accordingly this supply has been put into use for the Canteen and for drinking purposes throughout the Works.

Samples taken from a small private supply in the parish of South Malling-Without were found to be polluted. This source supplied some nine dwellings,

farm and dairy premises. After investigation the source of pollution was discovered and eliminated.

A private supply to Glynde Village was sampled regularly throughout the year with satisfactory results.

Negotiations with the Newhaven and Seaford Water Company concerning the laying of water mains through the rural district to Burgess Hill have continued throughout the year.

The Water Department and the Public Health Department have continued to work in close co-operation throughout the year.

SEWAGE DISPOSAL

Wivelsfield Green

Work on laying the sewers was completed, and by the end of the year sewage was flowing to the newly constructed Sewage Disposal Works. Work was started in January of the year and reached near completion by December, excellent work having been done by the contractors.

Beddingham

Work is nearing completion on the Sewage Disposal Works to serve part of the parish of Beddingham; the plant should be in operation early in the year.

Plumpton

No progress has been made during the year on the scheme of sewage disposal for the parish of Plumpton, although there is an urgent need in this parish for such a scheme.

Kingston

During the year an enquiry was held by the Minister into the need for a sewage disposal scheme proposed for the parish of Kingston. The scheme has since received formal consent from the Minister, but to date consent to begin this work has not been received. There is a very urgent and very real need for early commencement of this work as conditions of nuisance, likely to endanger health, exist in the parish. In addition, all housing development is now held up because of inadequacy of sewers and sewage disposal.

Rodmell

Although a Public Enquiry was held into the need for a Sewage Disposal Scheme for the parish of Rodmell in October, 1951, no approval has yet been given by the Minister in this instance. The officers of the Council have repeatedly drawn the Council's attention to the very considerable danger to the public health in this parish due to the absence of main drainage and the peculiar circumstances existing.

South Heighton

Negotiations have continued with the Newhaven U.D.C. concerning the joint scheme for the sewerage of the parish of South Heighton jointly with parts of the adjoining urban area.

Two small Sewage Disposal Plants to serve small groups of houses have

been completed during the year, and in both instances the Disposal Works completed at the expense of existing owners have been taken over by the authority as public sewers.

Newick

Preliminary work has progressed in respect of proposals for a reconstruction of the Sewage Disposal Works for the parish of Newick together with sewer extensions to serve part of the parish of Chailey.

PUBLIC CLEANSING

House refuse continues to be collected throughout the district once every fortnight. It is disposed of as before by controlled tipping within the Borough of Lewes by arrangement with that authority. This joint scheme continues to work admirably and with advantage to both authorities.

Salvage of wastepaper recommenced during the year on a very modest scale.

CESSPOOL EMPTYING SERVICE

This service continued throughout the year, three machines are employed, working constantly. During the year a considerable amount of overtime work was necessary in order to carry out orders received.

The total number of tanks or cesspools emptied over the period amounted to 2,975 with a total of 6,103 loads.

Some 150 tanks and/or cesspits are serviced at regular intervals varying from one week to six months, including the regular emptying of the tanks to Council-owned small Sewage Disposal Plants.

TRANSPORT DEPARTMENT

All the Council's vehicles, including refuse collecting vehicles, cesspool emptiers, trucks, vans, private cars owned by the Council are maintained by this Department. These have been well kept to a high state of mechanical efficiency during the year.

DUSTBINS

The Council's dustbin hire scheme has operated most successfully once again throughout this year, and with the aid of this procedure the Council is able to achieve very considerable progress in the provision of a proper dustbin for each house without recourse to the Courts. During the year the progress was as follows:—

No. of properties in respect of which Notices have been served	..	13
Notices not complied with		15
Bins supplied as result of Notices served by:—		
(a) Owner/Occupier		25
(b) Council		18
Bins supplied by Council <i>without</i> service of Notice		143

NUISANCES

During the year informal Notices were served under Section 92 of the Public Health Act, 1936, in forty-three instances; all these Notices, with one exception, have been complied with.

HOUSING

A feature of the work of housing was the obvious desire of the owners of poorer types of property (in particular farm cottages) to carry out schemes of reconditioning and reconstruction in order to bring these premises to a higher standard of living accommodation. The enthusiasm of owners was particularly noticeable when it was announced that Improvement Grants would be made directly by the Local Authority and it is in this direction that it is hoped very considerable improvement in the housing conditions of the district will be obtained. The indications so far are that next year should show a very substantial increase in the numbers of houses so reconditioned.

During the year under review thirty-five houses have been completely reconditioned, including provision of bathrooms, hot water systems, w.c.s, and all the other requirements generally considered necessary to-day. Of these fifteen were assisted by Improvement Grants. Most of these cottages were placed in Category V in the Rural Housing Survey, but having sound structural features and capable of preservation.

Plans have been approved and Grants awarded for thirty-five more similar premises by the end of the year and in respect of which work has not yet commenced.

Informal Notices served under Section 9 of the Housing Act numbered ten. Formal Notices under Section 9 of the Housing Act served were two. Formal Notices under Section 11 of the Housing Act, 1936, served were two. In respect of the latter, undertakings were given in both instances that the premises would not be used for human habitation.

The figures referred to above in relation to the service of Notices bear little relation to the actual work of housing repair in progress throughout the district during the year as a considerable amount of work is done by owners of estates in consultation with the Authority's officers, and these programmes of work of improvement and repair are done voluntarily and informally, and therefore, avoid service of either formal or informal Notices. The relationships between the Public Health Department and the various estates are good, and a considerable amount of work is thereby carried out by verbal agreement.

Since the restrictions on private building development have been lifted there has been a surge of building development, particularly in the Peacehaven area. During the year the number of completed houses built by private enterprise was 178, 85.4% of which were at Peacehaven, Telscombe Cliffs and Saltdean.

Inspection of dwelling-houses during the year:—

1.	(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	167
	(b) Number of inspections made for the purpose	293
2.	(a) Number of dwelling-houses (including under sub-head 1 above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	42
	(b) Number of inspections made for the purpose	86
3.	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	2
4.	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	76

Remedy of defects during the year without service of Formal Notice;—	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ..	63
Action under Statutory Powers during the year:—	
(a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:—	
(i) Number of dwelling-houses in respect of which Notices were served requiring repairs	10
(ii) Number of dwelling-houses which were rendered fit after service of formal notices:—	
(a) By owners	10
(b) By Local Authority in default of owners ..	Nil
(iii) Number of dwelling-houses acquired and subsequently rendered fit by the Local Authority.. .. .	Nil
(b) Proceedings under Public Health Acts:—	
(i) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ..	6
(ii) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(a) By owners	6
(b) By Local Authority in default of owners ..	Nil
(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936:—	
(i) Number of dwelling-houses in respect of which Demolition Orders were made	1
(ii) Number of dwelling-houses demolished in pursuance of Demolition Orders.. .. .	1
(d) Proceedings under Section 12 of the Housing Act, 1936:—	
(i) Number of separate tenements or underground rooms in respect of which Closing Orders were made ..	1
(ii) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
Housing Act, 1936—Part IV Overcrowding	
(a) (i) Number of dwellings overcrowded at the end of the year	Not known
(ii) Number of families dwelling therein	„
(iii) Number of persons dwelling therein	„
(b) Number of new cases of overcrowding reported during the year	None
(c) (i) Number of cases of overcrowding relieved during the year	3
(ii) Number of persons concerned in such cases ..	16
(d) Number of houses which again became overcrowded after Local Authority had taken steps to abate overcrowding	None

TENTS, VANS AND SHEDS

The first part of the scheme in the development of 20 acres of land at Rushey Hill, Peacehaven, was completed during the year and caravans were

accommodated during the summer months. The scheme would seem to be entirely successful and the prospects for future development are excellent.

In 1954 licences were issued authorising land to be used for caravan sites for a total of eighteen vans. By the end of the year thirty-five sites licensed to accommodate sixty-six caravans were in existence.

There is constant supervision exercised, particularly in the locality of Peacehaven and Telscombe Cliffs, where a very large number of vacant building plots appear to invite caravan owners.

SLAUGHTERING

Following the de-restriction of private slaughtering in July, 1954, three slaughterhouses previously licensed in the district recommenced slaughtering, and slaughtered regularly up to the end of the year. The number of animals killed during that period were:—

Bullocks	232
Bulls	6
Cows	282
Heifers	113
Calves	446
Pigs	705
Sheep	146
Horses	22
Total ..	1952

All animals killed are inspected at the slaughter houses.
Meat certified as unfit for human consumption:—

BEASTS

Carcases	—T.B.	9
Full Offals	—T.B.	10
	Inflammation	1
Parts of Carcases—		
Forequarters	—Casualties, general bruising ..	4
Sirloins	—Haemorrhages, etc.	1
Heads and Tongues	—T.B.	18
	Inflammation	1
	Actinomycosis	2
Livers	—T.B.	34
	Flukes	45
	Cirrhosis	27
	Abcesses	3
	Angioma	1
	Tumours	2
Lungs	—T.B.	73
	Pleurisy	13
Udders	—Mastitis	1
Hearts	—Cysticercus Bovis	1
	Inflammation	1
Spleens	—T.B.	3

Pigs

Carcases	—Septicaemia	..	..	..	1
Full Offals	—Ditto	..	..	..	1
Legs	—T.B.	..	..	..	2
Heads and Tongues	—T.B.	..	..	..	15
Plucks	—T.B.	..	..	..	1
	Inflammation	..	..	..	1
	Pleurisy	..	..	..	2
Udders	—T.B.	..	..	..	1
Kidneys	—Hydronephrosis	..	..	..	2
Livers	—T.B.	..	..	..	1
Lungs	—Pneumonia	..	..	..	25
	Pleurisy	..	..	..	1

Sheep

Lungs	—Parasites	..	..	..	4
Livers	—Ditto	..	..	..	2

The Council are to consider very carefully the licensing of private slaughter houses, and for this purpose a special Sub-Committee of the Council has been set up to investigate and study the problem as far as relates to this rural district.

MILK AND DAIRIES

During the year fifty-three visits of inspection were made to dairy premises in the district. This is a very reduced figure in comparison with previous years, the changes in relation to the milk industry are particularly noticeable in this rural district. Whereas large numbers of milk-producing premises were subject to inspection by local authorities, these are not now within the province of a Rural District Council, with a result that nearly all the milk brought into the district is received from large bottling establishments in the towns.

PETROLEUM ACTS

The testing of petroleum storage tanks continued throughout the year, and tanks installed before 1940 have now all been subject to testing. Thirty-five such tanks were tested during the year 1954, as a result of which seven tanks have had to be taken up as being unsafe and replacement tanks installed.

KEEPING OF ANIMALS

A few complaints only were received as to the keeping of animals, and these related in every case to the keeping of pigs by smallholders. Each case was dealt with informally.

FOOD AND DRUGS ACT

In this rural district there are relatively few eating establishments, and accordingly the numbers of inspections are not great in comparison with the population. Nevertheless, during the year 241 visits of inspection were made. Informal notices were served in five instances, in which cleansing and redecoration of premises was required. In two persistent cases it was necessary to ask for authority to take legal proceedings; proceedings, however, were not taken in either case as the offenders carried out all the requirements before proceedings could be taken.

The following articles of food, other than meat from slaughter houses, were certified as unfit for human consumption:—

8 x 2lb. tins Bartlett Pears

4 x 1lb. „ Apricots

5 x 1lb. „ Peaches

Applications for registration for the sale, manufacture and storage of ice cream were granted in three instances, and two transfers were made.

BROWN-TAIL MOTH

In last year's Annual Report mention was made of the infestation by these creatures in the parishes of Peacehaven and Telscombe. Further treatment was necessary at an early stage in the year in order to prevent a further recurrence of last year's nuisance as a survey showed that there were still large areas of land still infested with these creatures, and it was anticipated that, unless dealt with by the early part of June, the plague proportions would again be assumed. The work of spraying on a large scale was put in hand at the earliest opportunity likely to prove effective.

Operations commenced on the 15th February and were finished by the 8th May. Fifty acres of bush and scrub land were cut and burnt, twenty acres were sprayed and ninety other small individual sites were also sprayed. These preventive measures proved effective, and in one or two instances only were complaints received.

SUMMARY OF VISITS

House Inspections under Housing Regulations	42
Other Inspections of Houses not included above	200
Visits in connection with Nuisances	129
Visits to Slaughter Houses, Butchers' Shops and Food Premises ..	521
Visits to Dairies and Milk Premises	53
Visits re Drainage	1,179
Drains Tested	447
Samples taken for analysis—	
Ice Cream	13
Milk	285
Water	53
Visits in connection with Water Supplies	69
Visits in connection with Infectious Disease	9
Rooms Fumigated-Disinfected, Fleas, Flies and Insects	61
Visits to Sewage Outfall Works and Sewers	556
Visits to Refuse Tips and in connection with Refuse Collection ..	84
Visits under Petroleum Acts	230
Visits in connection with Salvage	14
Visits under Factories' and Workshops' Acts	99
Visits in connection with Residual Services	5
Visits in connection with Tents, Vans and Sheds	85
Visits in connection with Shops' Acts	51
Visits in connection with Caterpillar Control	151
Miscellaneous visits	701

RODENT CONTROL

Visits for purposes of Survey	711
Visits for purposes of Treatment	383
New Infestations found since	62
Infestations cleared	59
Estimated number of Rats killed	1,403
Estimated number of Mice killed	397

FACTORIES ACT, 1937

Inspections:—

<i>Premises</i>	<i>No. on Register</i>	<i>Inspections</i>	<i>No. of Written Notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	18	24	2	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	53	57	3	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding Out-workers' premises)	14	18	—	—
Totals	85	99	5	—

Cases in which defects were found:—

<i>Particulars</i>	<i>Found</i>	<i>Remedied</i>	<i>Number of cases in which defects were Referred by H.M. Inspector</i>
Want of Cleanliness	2	2	—
Section 7—Sanitary Conveniences— Unsuitable or Defective	6	6	1
Other offences against the Act (not including offences relating to Out-work)	—	—	—
Inadequate Ventilation	—	—	—
Inefficient Drainage of Floors	—	—	—

Part VIII of the Act—Outwork. Number on List: 2.

LICENCES ISSUED

To Store Petrol	67
To Store Cellulose	4
To Slaughter Animals	5
To use Premises as Slaughter Houses	4
To use Premises as Knacker's Yard	1
For Moveable Dwellings	14

Dealer's Licence to use Designation—

" Pasteurised "	8
" Tuberculin Tested "	11
" Sterilised "	4

Dealer's Supplementary Licence for the Sale of—

" Pasteurised " Milk	6
" Tuberculin Tested " Milk	8
" Sterilised " Milk	3

Pet Animals Act, 1951	1
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SALVAGE SALES

			<i>Tons</i>	<i>Cwts.</i>	<i>Qrs.</i>	<i>Lbs.</i>		£	s.	d.
Mixed Waste Paper	..	..	12	10	0	0	..	83	10	1
Mixed Cardboard	..	..	3	5	2	0	..	27	16	9
Light Metals	..	..	6	9	0	0	..	8	1	3
			22	4	2	0	..	£119	8	1

SECTION IV

**PREVALENCE OF, AND CONTROL OVER, INFECTIOUS
AND OTHER DISEASES**

INCIDENCE OF NOTIFIABLE INFECTIOUS DISEASES (excluding Tuberculosis) DURING THE YEAR 1954			
<i>Disease</i>	<i>Cases Notified</i>	<i>Cases Admitted to Hospital</i>	<i>Deaths</i>
Whooping Cough	46	1	—
Pneumonia	9	—	—
Measles	6	—	—
Scarlet Fever	4	1	—
Erysipelas	3	1	—
Puerperal Pyrexia	3	—	—
Salmonella Typhimurium ..	2	2	—
Paratyphoid	1	—	—
	74	5	—

Whooping Cough

Forty-six cases of whooping cough, representing 62.16 per cent. of the total number of cases of infectious disease notified, were notified in the area during 1954. Only one of these cases was sufficiently severe to warrant admission to hospital.

Since 1st April of the year under review a combined vaccine, which offers protection against both diphtheria and whooping cough has been made available in the urban district. This is mostly given to children under a year old, and no doubt its efficacy will be amply demonstrated in the years to come. The greatest danger from whooping cough occurs when it is contracted by a very young child, and by providing protection against the disease for such infants a major source of danger will be minimised.

Pneumonia

Nine cases of pneumonia were notified during 1954. None of the cases was sufficiently serious to require admission to hospital and all cases made satisfactory recoveries.

Measles

Only two cases of measles were notified in Chailey during 1954, a vastly different figure from the total of 370 cases notified in the area during 1953.

It is usually children under seven years of age who contract measles, and it is the complications and residual effects of the illness which are more to be feared than the disease itself. Broncho-pneumonia as a complication, and damage to the patient's ears or eyes as a residual effect, are now nearly always avoided by the use of penicillin and the sulpha drugs.

Scarlet Fever

Four cases of scarlet fever were notified in the Rural District during the year under review, as compared with eleven recorded cases during the preceding year. One of the cases was admitted to hospital. All made uneventful recoveries.

It is very important that the disease should be recognised and the patient segregated as early as possible as the period of infectivity begins very early in the attack. The patient should be isolated, contacts excluded from school, and in particular infected persons and recent contacts should be precluded from handling milk and milk products.

Erysipelas

Three cases of erysipelas were notified in the area during 1954, one of which was admitted to hospital. All three cases made uneventful recoveries.

Puerperal Pyrexia

Three cases of puerperal pyrexia were notified during 1954. For a number of years considerable efforts have been made throughout the country to lessen the incidence of this feverish condition amongst women after childbirth, and the Puerperal Pyrexia (Amendment) Regulations, 1954, came into force on the 1st March, 1954, and enacted that, in addition to the information already required, any doctor notifying a case of puerperal pyrexia should also state the cause of the illness if known. It is no doubt hoped that from the additional information thus gained it will be possible to devise means of further reducing the incidence of the illness.

Salmonella Typhimurium

Two children, a boy aged two years and a girl aged four years, were admitted to hospital and found to be infected with salmonella typhimurium. The infection proved rather difficult to clear up, the children were discharged from hospital six weeks later, and it was not until some time after their discharge that they were finally found to be free from the infective organisms. The organism is one that is frequently responsible for cases of food poisoning, and carriers are kept under observation until they are found to be free from infection.

Paratyphoid

One case of paratyphoid, that of a ten-year-old girl, occurred in Newick during 1954. The case was nursed at home. Carriers of the infective organisms are often quite fit, and have to all appearances recovered from the effects of the infection. As in the case of salmonella typhimurium infection, it is therefore most important that persons who have contracted paratyphoid should be proved by bacteriological tests to be free from the infective organism before they are finally freed from medical supervision. Detailed records relating to cases of paratyphoid are compiled by the Central Enteric Reference Laboratory and Bureau in London, and full details of the Newick case were submitted to the Laboratory.

General

Just on two-thirds of the total number of cases of infectious disease notified in the Chailey Rural District during 1954 were of whooping cough.

It is in years such as these, when no measles epidemic occurs, that the magnitude of the problem of whooping cough shows up in its true perspective, and one looks forward with pleasurable anticipation to the time when the widespread use of whooping cough vaccine has reduced the incidence of the disease to a minimum. It is unfortunate that at present we seem to be no nearer to obtaining a similar vaccine or other preventive agent to ward off measles. One can only hope that in time, too, this problem will be solved.

SECTION V

TUBERCULOSIS

In 1954 twenty-four cases of pulmonary tuberculosis and three cases of non-pulmonary tuberculosis were notified, whilst during the year there were two deaths from pulmonary tuberculosis and none from non-pulmonary tuberculosis. Of the cases notified, six pulmonary and one non-pulmonary were transfers into the area which had been previously notified elsewhere. Deducting these from the original figures a total of eighteen new pulmonary cases and

two new non-pulmonary cases is left. Details are given in the following table, transfers in being indicated by a T:—

1954—NEW CASES AND MORTALITY									
AGE PERIODS				NEW CASES				DEATHS	
				Pulmonary		Non-Pulmonary		Pulmonary	
				M	F	M	F	M	F
0	..	..	..	—	—	—	—	—	—
1	..	..	..	—	—	—	—	—	—
5	..	..	..	—	2 (1 T)	1	—	—	—
10	..	..	..	—	2	—	—	—	—
15	..	..	..	—	2 (1 T)	—	—	—	—
20	..	..	..	1	1T	1T	—	—	1
25	..	..	..	2	3 (1 T) (1 T)	—	—	—	—
35	..	..	..	2	2 (1 T)	—	—	—	—
45	..	..	..	2	2	—	—	—	—
55	..	..	..	2	1	—	—	—	1
65 and upwards	..	..	..	—	—	—	1	—	—
Totals				9	15 (2 T) (4 T)	2	1 (1 T)	—	2

Details of deaths from pulmonary tuberculosis:—

Female aged 24 years .. Died 10th July, 1954

Female aged 61 years .. Died 11th October, 1954

The two deaths due to pulmonary tuberculosis which occurred in the Rural District during 1954 show a death rate of only 0.10 per 1,000 population. As no death occurred due to non-pulmonary tuberculosis, the rate for pulmonary and non-pulmonary tuberculosis combined remains the same, namely 0.10 per 1,000 compared with a rate of 0.179 per 1,000 for England and Wales.

The treatment with B.C.G. vaccine of those classes of the community most exposed to the possibility of tuberculosis infection has only been carried out during recent years, and it will probably be some time before the statistical effect of the innovation and any reduction brought about in the tuberculosis death rate will become apparent.

As with most innovations, there has been apprehension on the part of some that the vaccine might be detrimental to those vaccinated, but the great value of this form of protection has now been proved. Although B.C.G. does not guarantee complete protection against tuberculosis, it is certainly the best form of protection so far introduced and cannot harm the person vaccinated.

